PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

pplication or Docket Number AFB00565

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			4					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			니 minus 20=		· »			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		ď			X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	·	OR	TOTAL	710.0	
CLAIMS AS AMENDED - PART II											OTHER	
_	1000 May 10 11	(Column 1)		(Colui		(Column 3)		SMALL		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT			BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	- /	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•/	Minus	***	5 01/4114	=		X40=		OR	X80=	
	FIRST PRESE	RESENTATION OF MULTIPLE DEPENDENT O					J	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3											
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	·	RATE	ADDI- TIONAL: FEE
	Total	·it	Minus		20	=		X\$ 9=		OR	X\$18=	
	Independent	*) NTATION OF M	Minus	***	$\stackrel{\frown}{\bigcirc}$			X40=		OR	X80=	
	FIRST PRESE	NIATION OF M	ULTIPLE DEI	PENDEN	CLAIM		1	+135=		OR	+270=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	4	(Colu	mn 2)	(Column 3)		٠			•	(.
AMENDMENT C		CLAIMS REMAINING, AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	ï
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESS	NTATION OF M	LILTIPLE DE	PENDEN	T CLAIM	Carrier III			 -			
	If the entry in colu	mn 1 is less than t	he entry in colu	ımn 2 weit	e "()" in ~	lumn 3		+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												